Important Privacy Choices for Consumers

You have the right to control whether we, **Direct Merchants Credit Card Bank**, **N.A.**, share some of your personal information. Please read the following carefully before you make your choices below.

Your Rights

You have the right to restrict the sharing of personal and financial information with outside companies we do business with. Nothing in this form prohibits the sharing of information necessary for us to follow the law, as permitted by law, or to give you the best service on your account(s) with us. This includes sending you information about some other products and services. We will not share your information with outside companies except for the two options listed below. Those options are in addition to the options in the enclosed "Privacy Statement". Choices you make on this form will no longer apply if you move out of California.

move out of California. **Your Choices** Restrict Information Sharing With Financial Companies We Contract With To Offer and Provide Financial Products And Services: If you check "No," we will not share your personal and financial information with outside financial companies we contract with to offer products and services to you. () NO, please do not share my personal and financial information with these companies. Restrict Information Sharing With Non-Financial Companies We Have an Affinity Agreement with To Issue Credit Cards: If you check "No," we will not share your personal and financial information with non-financial outside companies, with which we have an affinity agreement to issue credit cards. () NO, please do not share my personal and financial information with these companies. **Time Sensitive Reply** You may make these choice(s) at any time. Your choice(s) marked here will remain active unless you state otherwise or move out of California. However, if we do not hear from you we may share some of your information with the companies described in the choices above. Please print clearly Name: ______Account Number(s): ______ Signature: Daytime telephone:

To exercise your choices fill out, sign and send back this form to us. You may send this form back to us in the enclosed postage-paid envelope. You may want to make a copy of this form for your records.

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Your Choices

Restrict Information Sharing With Financial Companies We Contract With To Offer and Provide Financial Products And Services: If you check "No," we will not share your personal and financial information with outside financial companies we contract with to offer products and services to you.

(_) NO, please do not share my personal and financial information with these companies.
over Restrict Information Sharing With Non-Financial Companies We Have an Affinity Agreement with To Issue Credit Cards: If you check "No," we will not share your personal and financial information with non-financial outside companies, with which we have an affinity agreement to issue credit cards.

(_) NO, please do not share my personal and financial information with these companies.

Time Sensitive Reply

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Please print clearly
Name:
Account Number(s):
Signature:
Daytime telephone:
To exercise your choices fill out, sign and send back this form to us. You may send this form back to us in the enclosed postage-paid envelope. You may want to make a copy of this form for your records. A-12736